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Office of Vocational
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Annual Report
of the
Federal Security
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Office of Vocational
Rehabilitation

FOR THE FISCAL YEAR

1946

LETTER OF TRANSMITTAL

FEDERAL SECURITY AGENCY,
OFFICE OF VOCATIONAL REHABILITATION,
Washington 25, D. C., October 23, 1946.

The Honorable Watson B. Miller,
Federal Security Administrator.

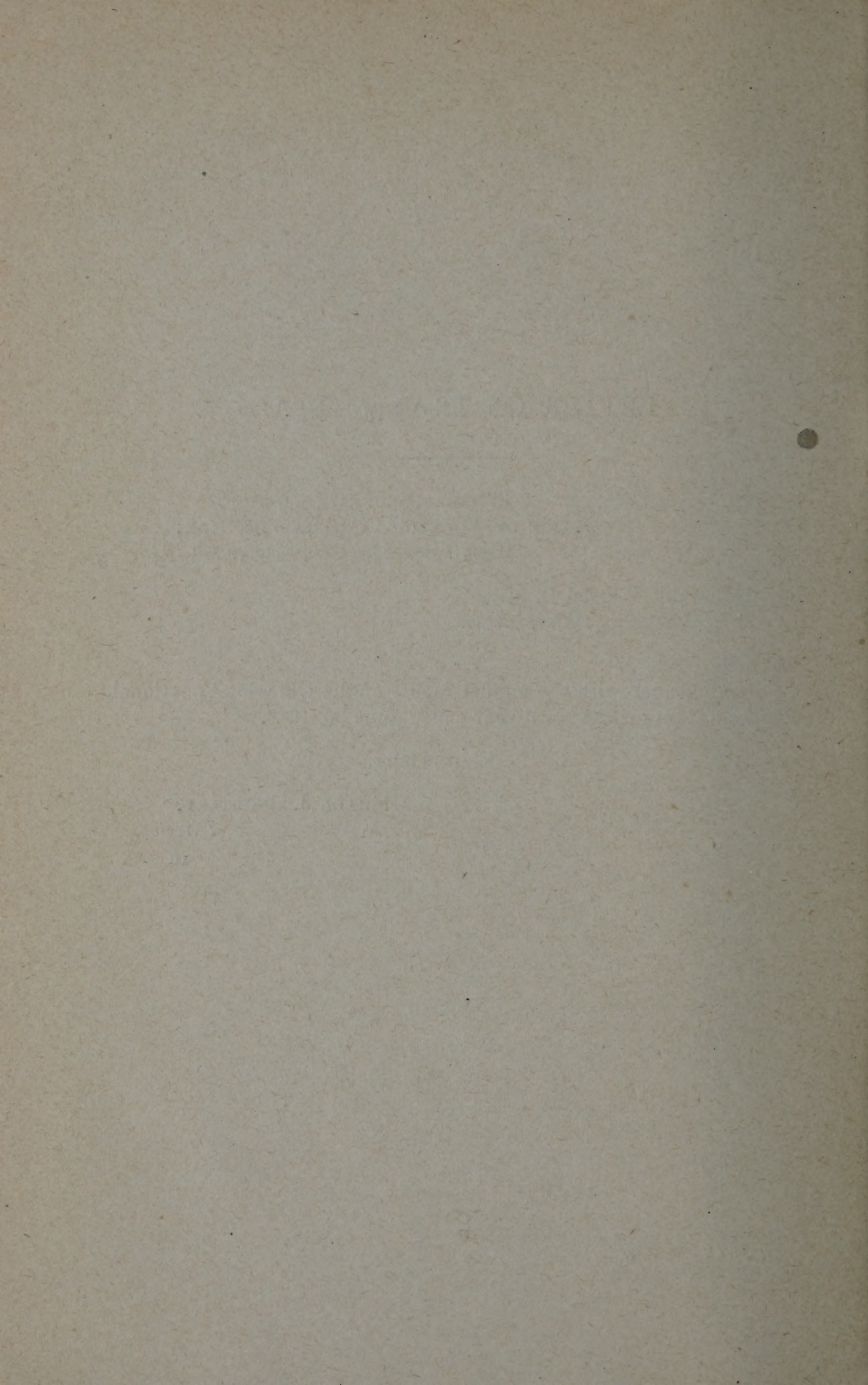
Dear Mr. Miller,

I submit herewith the annual report of the Office of Vocational Rehabilitation for the fiscal year ended June 30, 1946.

Respectfully,

MICHAEL J. SHORTLEY,
Director.

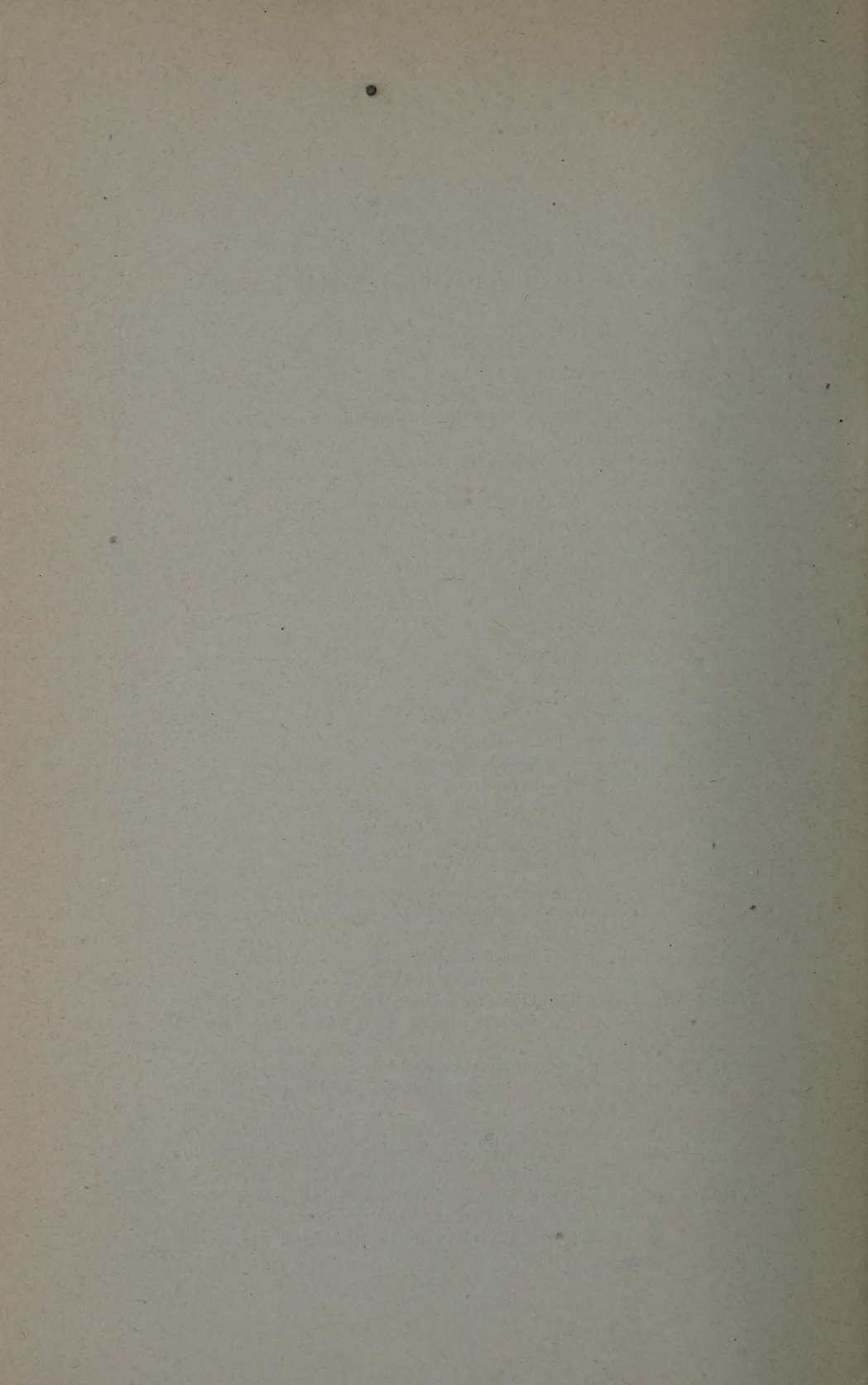
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SECTION THREE

OFFICE OF VOCATIONAL REHABILITATION

INTRODUCTION

The 1946 fiscal year was characterized by marked progress on the part of the Office of Vocational Rehabilitation and the cooperating State vocational rehabilitation agencies in four vital areas:

- (1) The quality of vocational rehabilitation services rendered to mentally and physically handicapped men and women was improved;
- (2) The quantity of essential vocational rehabilitation services rendered was increased;
- (3) The number of handicapped persons who received vocational rehabilitation services was increased; and
- (4) Vocational rehabilitation services were brought closer to the men and women who need them, through a process of decentralization.

Several factors have contributed to the achievements of the past fiscal year. The Office of Vocational Rehabilitation has augmented its professional and technical staff to some extent. Following the lead of the Federal Government, the States also have increased their staffs and in many instances have opened additional district offices to meet in part the need for rehabilitation services. The increases in working staff and in decentralization have made medical services, counsel and guidance, training and placement services more readily available to the people for whom these services have been established under Public Law 113 and the laws of the various States and territories.

The 1946 fiscal year also was marked by a more general appreciation of the need for medical and other physical restoration services and a more general utilization of existing facilities in providing vocational rehabilitation. There was also a general increase in the number of training services with emphasis on longer-term and higher-level instruction to meet the peacetime demand for workers of high qualifications.

One of the most significant aspects of the last fiscal year was the general recognition of the magnitude of the problem confronting the agencies responsible for administration of the Federal-State program.

Extent of Need for Vocational Rehabilitation

Despite the progress reported above, there is a continuing and growing unmet need of major proportions for the services which are provided through the Federal-State partnership in vocational rehabilitation. There are at least 1,500,000 men and women of working age in the United States—not including veterans with service-incurred disabilities—who have physical or mental impairments which are sufficiently disabling to be considered job handicaps. Furthermore, the backlog of disabled persons of working age who are eligible for and in need of vocational rehabilitation services increases by 250,000 a year.

The Office of Vocational Rehabilitation has urged consistently that the State vocational rehabilitation agencies properly appraise the extent of the problem for which they have responsibility and take the necessary steps to fill the unmet needs.

As a necessary step toward determination of the size of the problem, the board of directors of the National Rehabilitation Association and virtually all State directors of vocational rehabilitation agencies have agreed that throughout the Nation there are at least seven persons in each thousand of the population who are eligible for and need vocational rehabilitation services in order to engage in gainful employment commensurate with their capacities, or to work at all.

Many believe that, with existing authority to extend rehabilitation services to the mentally handicapped, the incidence of eligible disabled is more nearly 10 in each 1,000.

In its preliminary report (December 1944), the House Subcommittee to Investigate Aid to the Physically Handicapped (House Committee on Labor) commented as follows: "When the figures showing the number that were rehabilitated with the incidence of disabling disease and accidents in this country are studied, it is immediately apparent that the facilities available are not sufficient to keep abreast of the load."

To bring the services more nearly in line with the readily apparent need on a quantitative basis, the Office of Vocational Rehabilitation has urged the State agencies to expand their efforts to the point where 500,000 vocationally handicapped men and women, in addition to those now in process of rehabilitation, will be started on the road to successful employment by the end of fiscal year 1948. With this number in process of rehabilitation at all times, it may reasonably be expected that 150,000 handicapped men and women will be rehabilitated into gainful employment within 1 year. Once having attained that goal, it should be relatively easy to keep abreast of the incidence of disability, and probably to reduce progressively the backlog.

It is encouraging to note that the executive committee of the States Vocational Rehabilitation Council, composed of eight State vocational rehabilitation agency directors and serving in an official advisory capacity to the Office of Vocational Rehabilitation, has adopted as a goal the rehabilitation into employment of at least 150,000 disabled persons during the 1948 fiscal year.

Continued increases of staffs and many improvements at both the Federal and State levels will be required to attain this desirable and completely realistic goal. Probably some changes in the existing laws will be necessary. Recommendations relating to necessary improvements, including desirable amendments of laws, will be made specifically to appropriate authorities at appropriate times.

Scope and Administration of the Federal Act

Under the Vocational Rehabilitation Act Amendments of 1943 it became possible to serve not only the physically handicapped but also the mentally handicapped as well as those whose physical disabilities are complicated by mental difficulties. Specific provision was made for the blind; for war-disabled civilians—including merchant seamen—and for civil employees of the United States Government, injured in the performance of duty.

Administration of the amended act was made the responsibility of the Federal Security Administrator, who established the Office of Vocational Rehabilitation to carry out the responsibilities set up under the revised law.

These responsibilities include establishment of standards in the various areas of service; technical assistance to the States and certification of funds for grants-in-aid to the States upon approval of State plans for vocational rehabilitation which meet requirements of the authorizing act of Congress.

Grants-in-aid provisions were continued under the amended act; restrictions as to Federal expenditures permissible for program operations were, however, liberalized. All necessary administrative costs, including vocational guidance and placement, are now assumed by the Federal Government. Costs of medical treatment, vocational training, and similar services are shared by State and Federal Governments on a 50-50 basis. Costs of serving war-disabled civilians are 100 percent reimbursable from Federal funds.

Not only were fiscal provisions liberalized under the new act but, for the first time, Federal expenditures were made possible for physical restoration, an integral function in the rehabilitation of a vocationally disabled individual.

Organization of the Office of Vocational Rehabilitation

The Office of Vocational Rehabilitation is organized into two functional divisions: The Administrative Standards Division, made up of two sections—management standards and fiscal standards and control; and the Rehabilitation Standards Division, comprising four sections—physical restoration; services for the blind; advisement, training, and placement; and research and statistics.

The 1946 fiscal year brought about the strengthening of the Information Service as a staff-arm to the Director in assisting the States to perform their public information function.

Seven regional offices maintain close working relations between the States and the Federal office.

Programs of the Office of Vocational Rehabilitation continue to be significantly influenced by the needs of the disabled and the special post-war problems arising as services to meet these needs are expanded.

Advisory Committees

Recognizing the need for professional advice on matters of policy and program operations, the Office of Vocational Rehabilitation relies to a considerable extent on advisory committees. The National Rehabilitation Advisory Council is composed of leaders in business, industry, labor, medicine, education, services to the blind, social welfare, and others whose interests are closely related to the problems of the civilian disabled. This committee met during the past fiscal year for the first time since 1943. The committee was forced to suspend its meetings during the war because of overtaxed transportation and hotel facilities.

At its meeting, the National Rehabilitation Advisory Council dealt with the coordination of related programs and formulation of closer working agreements between the Office of Vocational Rehabilitation and the State agencies, on the one hand, and public and voluntary agencies and organizations that are concerned with the vocational adjustment of physically and mentally handicapped persons, on the other.

Another advisory group is the Professional Advisory Committee, composed of representatives of the medical specialties concerned with the physical and psychiatric rehabilitation phases of the program. This group did not meet during the past fiscal period because of lack of funds.

Vitaly important is the executive committee of the States Vocational Rehabilitation Council, which has been referred to earlier in this report. The first purpose of this organization of State directors is to cooperate with the Office of Vocational Rehabilitation by serving in an advisory capacity regarding the formulation of Federal policies

and standards which pertain to the States and the promotion of harmonious and effective relationships.

The Office receives valuable advisory service from State agency and other groups in addition to that given by the formally constituted advisory committees. While by no means complete, the following listings will serve as examples:

The Council of State Executives for the Blind conferred with the Office during the consideration of amendments to the Randolph-Sheppard Act, in anticipation of the transfer of the functions under that law to the Office of Vocational Rehabilitation from the Office of Education.

An especially appointed committee of medical social work consultants assisted in the revision of qualifications for medical social work consultants.

A committee of State agency personnel assisted in the revision of State forms and case reporting and recording.

A subcommittee on public information of the States Vocational Rehabilitation Council gave great assistance in the establishment of preliminary public information policies.

Cooperative Relationships With Other Agencies

One of the major responsibilities of the Office of Vocational Rehabilitation is to function as a national agency for the coordination of the activities of all public and voluntary organizations working for the disabled. Concrete evidence of the execution of this responsibility lies in the written cooperative agreements, which this office has consummated with a number of groups at the national level. During the past year agreements were entered into with the Farm Security Administration, the National Association of the Deaf, and the National Association of Goodwill Industries, bringing to 16 the total of such agreements made since the establishment of the Office of Vocational Rehabilitation under Public Law 113 in 1943. Others are in process of negotiation. Also, a statement of clarification of the agreement with the Children's Bureau was distributed to all State agencies and interested individuals. Since the close of the fiscal year, an agreement with Veterans' Administration to provide continuous rehabilitation services for veterans of World War II who may need services in addition to those provided by the Veterans' Administration, and to effect mutual referral and cooperation in the provision of services to veterans with non-service-connected disabilities through State vocational rehabilitation agencies, has been effected. Other previously completed agreements are in effect with the National Tuberculosis Association; Selective Service System; National Association

to Control Epilepsy; National Industries for the Blind; American Hearing Society; United States Employees' Compensation Commission; United States Employment Service; War Shipping Administration; United States Public Health Service (War Disabled Merchant Seamen); United States Public Health Service; Children's Bureau, Division of Health Services; Social Security Administration, Bureau of Public Assistance; Social Security Administration, Bureau of Old-Age and Survivors Insurance.

The Office of Vocational Rehabilitation initiated a conference on the rehabilitation of the tuberculous with the National Tuberculosis Association and the United States Public Health Service, having co-operative agreements with both these organizations. As a result of this conference a special study project in six selected tuberculosis sanatoria was undertaken by the three groups to evaluate the respective functions and services of the different fields which contribute to the several aspects of a rehabilitation program for the tuberculous as observed through the study of specific operating programs. The ultimate purpose of the study, which was initiated early in June and is continuing into the 1947 fiscal year, is to define the appropriate functions and activities for each area of service, to point out the proper roles of the various special personnel engaged in such a rehabilitation program and methods for coordinating the various services, and finally to present material for use in the formulation of a model plan or proposals for a demonstration project.

Services to the Individual

In the State divisions of vocational rehabilitation functioning under the State boards of vocational education is vested the responsibility of providing rehabilitation services to all disabled persons living within the States.

State commissions or agencies for the blind, however, provide rehabilitation services to the blind, where legal authority exists for rendering such service. Where such authority does not exist, rehabilitation of the blind is a function of the State rehabilitation agency which, in all States, provides services to the visually handicapped who do not come within the legal definition of blindness.

Determination of eligibility of an individual for service is a responsibility of the States and determination is based upon three basic principles:

1. A person must be of employable age.
2. An occupational handicap must exist by reason of disability.
3. The individual may be rendered employable or more advantageously employable through rehabilitation services.

To assist in determining eligibility for service a thorough medical examination, which may include not only a general medical examination but such specialist and laboratory examinations as are necessary, is required under the rules and regulations pursuant to Public Law 113.

State Plans and Certification of Funds to States

State plans setting forth basic policies and procedures and administrative organization for carrying out a program of rehabilitation as required by the enabling act are submitted by the States to the Office of Vocational Rehabilitation for approval. The plans for all State rehabilitation agencies previously had been submitted and approved, but amendments submitted by eight commissions for the blind were reviewed and approved during the past fiscal year. This brought to 84 the total number of State agencies administering vocational rehabilitation programs, including 51 Boards of Vocational Education and 33 Commissions for the Blind. The States were assisted in improvement of plans.

During the fiscal year 1945-46, on the basis of budget estimates submitted for a 6-month period and after taking into account unexpended Federal funds, over \$10,800,000 was made available to State rehabilitation agencies and to separate State agencies for the blind having approved State plans. In addition, State appropriations totaled approximately \$3,800,000.

WORKING WITH THE STATES

Advisement, Training, and Placement Services

Counseling or advisement is an essential service extended throughout the rehabilitation process to all disabled clients. Furthermore, counseling is the one service extended to disabled persons directly by the State rehabilitation agencies. It continues throughout the entire rehabilitation process. Because of the value of this service to disabled persons, effort has been directed toward improving the quality.

The dominant function of advisement, training, and placement services in the fiscal year was to meet requests of State agencies for advancement of standards of performance of rehabilitation workers through stimulation of their professional growth in service. The induction of new workers, by the State agencies, as a corollary of the expansion of rehabilitation services under the provisions of Public Law 113, emphasized the need for assistance from the Federal office in training and developing rehabilitation workers.

Upon the requests of the State agencies; staff development programs, consultative services, and technical materials were provided as means of improving performance. The ultimate objectives of all these activities were improved counseling practices and the development of means for early location of cases in need of rehabilitation. As the nucleus of the rehabilitation process and the single service provided directly by the rehabilitation worker, a service which is continuous, counseling is properly a primary concern. Likewise, the development of case-finding methods which insure prompt location and referral of disabled individuals and thereby thwart the vitiating effects of delay is fundamental.

Two highly significant innovations were undertaken in the staff development programs to meet the requests of the State agencies. These were the workshop for the rehabilitation of the tuberculous and the workshop on casework supervision.

In cooperation with the National Tuberculosis Association, three workshops on special techniques in the rehabilitation of the tuberculous were held. These were as follows: November, 1945, at Montefiore Country Sanatorium, Bedford Hills, N. Y.; March, 1946, at Sunny Acres Sanatorium, Cleveland, Ohio; and May, 1946, at Municipal Tuberculosis Hospital, St. Louis, Mo.

In addition to the primary aims of counseling and case finding, these workshops were designed to point the way to more prompt initiation of rehabilitation services, to be started at the earliest possible point of convalescence in the sanatorium, for this special group. The three workshops were attended by 55 workers from 35 States.

Those States in which decentralization of the program has moved forward, and in which there has been an addition of new professional workers, emphasized the need for the development of techniques of supervision and in-service training at the State level. Accordingly, as requested by the States represented, two workshops on casework supervision were held (Chicago and St. Louis) at which minimum standards for performance in casework and methods of in-service training were developed as approaches to better counseling and case finding. Thirty-nine professional workers of supervisory rank from 24 States participated.

Fourteen regular orientation institutes were conducted as the States requested them, with 508 rehabilitation workers from all regions attending.

In summary, 21 staff development programs were held, with 618 rehabilitation workers, ranging through all professional grades and from all regions, taking part.

Personal consultative services were provided upon request of State directors, regional representatives, or cooperating organizations in all parts of the country. The subject matter of the consultations covered all aspects of the rehabilitation program at one time or another. Of major significance were technical advice to the States on psychological testing, on the extension of services to the tuberculous, and to the deaf and the hard of hearing; analysis of and recommendations regarding existing programs of national organizations interested in the welfare of the disabled; collaboration with and technical assistance to governmental and philanthropic organizations functioning on administrative or research levels for the advancement of rehabilitation practices.

Materials designed to stimulate the development of high quality professional performance were distributed to State agencies and cooperating organizations. The areas covered included psychological testing, occupational information, suggested procedures for rehabilitating special groups of the handicapped, counseling and guidance, selective placement, and annotated bibliographies of pertinent and current literature.

The preparation of technical manuals on employment training, casework standards, and economic need has been carried on as circumstances permitted. In addition, studies have been made of certain

aspects of the rehabilitation of special groups of the disabled, such as the deaf, the hard of hearing, the blind, and the tuberculous.

Physical Restoration Services

This office is charged with responsibility for developing standards, policies, and techniques governing the provision of physical and mental restoration services, such as medical, surgical, and psychiatric treatment, hospitalization, convalescent care, physical therapy, occupational therapy, and prosthetic appliances; making studies of operations of State physical restoration programs for the purpose of evaluating the physical restoration services provided; appraising existing techniques with a view to improvement of technical services and referral of specific problems to appropriate research agencies.

The physical restoration staff consists of medical officers assigned by United States Public Health Service, a medical social work consultant, and a physical restoration analyst. In three of the seven regional offices, medical officers serve as assistant regional representatives.

During the 1946 fiscal year, a full-time consultant in psychiatry and a part-time consultant on orthopedics and prosthetic devices were added to the staff. Plans are continuing for expansion of the staff to include consultants in ophthalmology and otology, a psychiatric social work consultant, and additional regional medical officers.

In addition to providing consultative services to the regional offices and the States, members of the physical restoration staff attended numerous orientation institutes, workshops for the rehabilitation of the tuberculous, workshops on casework supervision, regional conferences of State personnel, and meetings of related and professional organizations, where they presented papers, spoke as members of panels, interpreted the vocational rehabilitation program or emphasized specific aspects such as physical restoration, psychiatric rehabilitation, or problems of the severely handicapped.

Medical officers prepared technical and general materials, including published articles on Rehabilitation of the Tuberculous, Selective Placement of Disabled Employees, Rehabilitation Is a Good Investment, The Expanded Federal-State Vocational Rehabilitation Program, A Government Program for the Vocational Rehabilitation of Disabled Civilians, and Physical Rehabilitation of the Amputee.

In several States, special attention has been given to rehabilitation of epileptics and to the organization and development of special centers for their treatment. Considerable consultation has also been given on patterns of utilizing existing facilities available in metropolitan centers or in connection with university hospitals for medical treatment and related services to epileptic persons. Other activities

included consultation in connection with planning centers to train clients in the use of artificial limbs and development of hearing aid centers adapted to civilian and community needs from the pattern of Army centers for the aurally handicapped.

A special study of current practices of State vocational rehabilitation agencies in furnishing artificial limbs to clients was initiated. The findings will be used as a basis for developing recommended standards in this field, covering such immediate aspects as fitting the limb and training in the use of the artificial appliance, as well as long-range objectives such as professional standards for limb and brace making and licensing or certification.

In the field of medical social work, through meetings with related and professional organizations, four main objectives have been stressed: Interpretation of the social aspects of medical care, disability and rehabilitation of the physically handicapped; interpretation of the physical restoration program and of the use of medical social workers in such a program; promotion of personnel standards and standards of medical social practice in public programs of health and medical care; stimulation of joint consideration of needs for medical social work personnel, of the type of training needed for workers in public programs, and of improved methods of recruitment. Fifteen of the eighteen schools of social work which offer approved medical-social curricula were contacted to explain current needs for this type of personnel in State programs and to keep faculty members informed of developments in vocational rehabilitation.

By the close of the year all but 7 of the 84 State agencies had employed supervisors of physical restoration. All but three agencies had filled the position of State medical consultant. Three States had employed district medical consultants in order to make medical consultation immediately available to counselors in the district offices. Decentralization of program operations effectively points up the need for medical advice to the counselor in the diagnostic and planning stages.

Thirty-five States had secured medical social work consultants on full-time or part-time basis.

In general, State vocational rehabilitation agencies have used actively their medical advisory committees in formulating standards for buying medical service and preparing fee schedules, but a few States are not utilizing advisory groups as fully as might be hoped. By the end of the fiscal year, 66 of the 84 State agencies had formulated standards and policies for buying physical restoration services, including standards of medical diagnosis, scope of services, standards of physicians and of hospitals, and rates of payment for professional services and hospital care. The majority of the State agencies had,

by the end of the year, developed fee schedules listing maximum rates of payment for medical examinations, medical and psychiatric treatment, surgical procedures, clinical laboratory tests, X-rays, dental treatment, and other physical restoration services. Some difficulties in evolving satisfactory rates have centered around rising costs and rates paid by other governmental agencies for similar services. Successful negotiation of a fee schedule that is administratively practicable and acceptable to doctors requires full use of a medical advisory committee and of real cooperation with other governmental agencies that are engaged in purchasing medical care and related services.

State programs of physical restoration made progress generally, but there still is room for some improvements. Greater stimulation of cooperative relationships with medicine societies, hospitals, and other health and welfare agencies is needed, not only at State and local levels but also at regional levels. Coordinated plans for rehabilitation of amputees should be developed, encompassing surgery, after-care of the stump, fitting the appliance, and training in the use of the appliance. Attention also should be directed to development of services for the aurally handicapped through participation of physical restoration personnel in the planning of hearing aid centers in various key communities, adapting the best techniques of the armed forces to civilian needs.

In the extension of services to special disability groups, there is need for consideration of the problem in terms of adapting diagnostic standards, in measuring physical capacities, and in appraising job objectives that may be within the limitations of severe disabilities. More complete medical information regarding eye pathology and visual handicaps should be supplied to counselors so they may better select rehabilitation objectives which will conserve existing vision. Special attention also should be given to medical diagnosis covering other than eye disabilities.

Emphasis on development or expansion of community resources for medical treatment and other case work services to epileptic persons should be continued, preferably in connection with teaching hospitals or well-established clinics.

Development of psychiatric services for persons disabled by mental illness or emotional disturbances needs to be stepped up. Such development depends both upon leadership and the employment by State agencies of personnel with training and experience in working with mental illness. Employment of specialist personnel to deal with this group should be supplemented by considerable in-service training to all counselors on psychiatric information, personality development and the dynamics of human behavior. In-service training might also be supplemented by provision of educational leave to counselors whose background of training is deficient in this respect.

Services for the Blind

During the fiscal year, services for the blind were provided in four major categories: Rehabilitation of clients, training of State personnel through various types of institutes, field follow-up service in adapting basic training materials to specific situations in the States, and the development of additional types of training materials for State personnel.

In the first major category, that of the rehabilitation of clients, the States reported that a total of 1,419 blind persons were prepared for and placed in employment during the fiscal year. Postrehabilitation earnings of this group were estimated at the rate of about \$1,762,000 a year. The majority of placements were in industrial work, including workshops for the blind. Next in number were businesses such as vending stands and neighborhood stores, followed by clerical occupations such as dictaphone operating. Some few blind persons were prepared for and placed in social work, bee keeping, rabbit farming and highway fruit markets. While these latter placements are not important numerically, they indicate the opening of new fields for the blind.

Conducting training institutes for State agency staff members who are engaged in rehabilitating the blind is one of the most important services for the blind which the Office of Vocational Rehabilitation performs. Two types of institutes were conducted during the fiscal year. One is an intensive, concentrated course of instruction for persons, generally blind, who are employed by State agencies to rehabilitate the blind into industrial production employment. The other is the orientation institute, which is conducted for blind persons, as well as sighted, in the basic philosophy underlying Public Law 113 and the fundamentals essential in the performance of the many services which are needed by blind individuals who are eligible for rehabilitation.

Plans have been made to extend the intensive, concentrated training courses to State specialists in business enterprises for the blind, the readjustment of blind persons in rural activities, the development of professional careers for the blind, and the development of special workshops and home industries.

Industrial employment counselors who serve the blind of 17 States attended two of the intensive industrial training institutes, each of which ran for 6 weeks. To the extent possible, these persons were given follow-up training in the field on the completion of the institutes to assist them in solving placement problems encountered in their States. Many previous students in these institutes were given follow-up service also, to enable them to adjust to technological changes in industry.

Despite the outstanding production records which blind workers made in wartime industries, there was apparent a tendency on the part of employers to revert to unfounded prewar attitudes in opposition to the employment of handicapped persons, and particularly the blind. Emphasis in the training institutes was placed upon methods of overcoming this resistance on the part of employers. A blind industrial specialist during one institute learns as many as 100 production operations, and the necessary steps to perform each one safely. These operations and safety practices are learned in cooperating industrial plants, under the supervision of the plant's foremen. The industrial specialist then demonstrates to employers that he can operate the machines efficiently and safely and points out that other blind persons can be trained to do the same. He obtains experience, under expert guidance, in answering the objections of employers, and follows this up with actual interviews with employers on the subject of placing well-trained blind workers in their plants. Thus he acquires practical knowledge which he uses for the benefit of the blind persons in his State at the conclusion of the institute. The mechanical training is supplemented with practical instruction in industrial management and labor problems, industrial safety, public liability insurance and workmen's compensation, and personnel relationships.

Seventy-five representatives of State agencies which serve the blind attended two orientation institutes. Ohio sent 32 persons to the institutes and Texas sent 18. Other States were represented with the following numbers: Arkansas 2, Kansas 2, Louisiana 4, Missouri 9, New Mexico 1, Oklahoma 5, and Michigan 2.

An important project was the development of materials to be used for training staff members of State agencies in developing rural activity programs for the blind. Considerable information was compiled regarding participation of blind persons in various farm and rural enterprises such as poultry and turkey raising, rabbit raising, dairy farming, mushroom growing, general farming, greenhouse and truck farming, horticulture, holly growing, and small manufacturing pursuits suitable to rural areas. (These materials were used in the first training institute for rural specialists which was held at Clarksville, Ga., beginning in October 1946.)

As an aid to State agencies, this Office issued basic materials containing essential provisions for the establishment and operation by State agencies of business enterprises programs which will serve as employment opportunities for the blind.

State agencies have been moving ahead in administrative organization for physical restoration services. In 10 States, the agency serving the blind has joined with the general vocational rehabilitation

agency in establishing a single physical restoration unit, staffed with the same technical personnel and setting the same standards for purchase of services.

Considerable assistance was given to State directors in establishing rehabilitation objectives. Emphasis was placed on the need for providing services in all fields instead of concentrating on one activity such as workshops, industrial employment, vending stands or home industries.

Cooperation with the services of the blind section of the Veterans Administration for the purpose of coordinating veterans and civilian rehabilitation services on a national scale was another activity of the year.

At the request of the War Department, the Office of Vocational Rehabilitation provided a number of counseling interviews for blinded soldiers prior to their discharge from the training center at Avon, Conn., to assist them in planning future activities.

During the fiscal year more than \$1,274,000 was made available to 31 commissions or other agencies furnishing rehabilitation services for the blind. Substantial additional funds for rehabilitation of the blind were included in the grants to agencies which administer programs for both seeing and blind clients.

Management Services to State Agencies

The development of the expanded program of vocational rehabilitation under Public Law 113 requires sound organizational and administrative planning on the part of each State agency. It also entails program planning which is focused on specific goals and which sets up operating plans to insure the achievement of these goals.

During the year, the Office of Vocational Rehabilitation has worked with the States in general and with particular States in the development and application of organizational and management plans for providing an adequate flow of services to the disabled. In some States this has involved the establishment of operations on a decentralized basis through a district office system. In other States additional district offices have been opened. District offices have been established in order that rehabilitation services may be made more readily available to all disabled persons. To achieve this objective, it is, of course, necessary to delegate to the district offices the authority and responsibility needed for successful operation. At the same time, provision must be made for adequate State central office reporting and control.

The development of the district office system is playing an important part in meeting the needs of the expanded program. Consideration has, however, also been given to the most effective use of

rehabilitation staffs operating out of a single State office. In all instances emphasis has been placed on the importance of administrative and budgetary planning to meet the needs of the disabled in the particular State as well as to meet the needs of the disabled in the nation as a whole.

The Office of Vocational Rehabilitation has also assisted the States with such aspects of administrative management as the integration and coordination of services, the use of consultative services, the clarification of functions and responsibilities of individual positions, the evaluation of qualification standards and examining procedures and the fixing of compensation schedules.

A coded system for the issuance of official communications from the Federal Office to all State agencies was put in operation. This system has been devised to provide uniformity and consistency of approach, and to provide a ready identification of all issued materials and to simplify reference.

Further work has also been done in the preparation of qualification standards for key positions in State Divisions of Vocational Rehabilitation. The proposed standards have been discussed with organizations in the rehabilitation field and there has been a general recognition of the need for such standards. Work has also been done on the analysis of the functions and responsibilities of positions in specialized rehabilitation fields.

While progress has been made within this period in the building of a sound program of vocational rehabilitation, the needs of an expanding program require continuous evaluation by the States of the effectiveness of their organizational plans and administrative operations in order that the principal purpose in rehabilitation—that of making services available to disabled persons—may be met.

Information Services

In compliance with suggestions of the House Subcommittee to Investigate Aid to the Physically Handicapped (House Committee on Labor), and in accordance with the administrative determination of this Office that there is a need for much greater dissemination of public information concerning the Federal-State program of vocational rehabilitation for civilians, the informational services and efforts of the Office were considerably strengthened and intensified during the fiscal year.

Informational efforts were undertaken on an expanded scale in the belief that they not only inform disabled persons of the services available but also contribute to the efficiency and economy of the operation of the program:

(1) By stimulating earlier rehabilitations, which are more effective and less costly than if services are started after disease and injury have vitiated hope, determination, and skills,

(2) By convincing employers that the properly rehabilitated and properly placed person with a physical or mental handicap is an efficient and desirable employee,

(3) By increasing the understanding and cooperation of agencies which should work closely with the State vocational rehabilitation agencies, and

(4) By increasing the understanding and cooperation of the general public.

During the fiscal year the Office of Vocational Rehabilitation was able to reach a much wider segment of the general public than ever before in the short history of the Office of Vocational Rehabilitation. This increase in effectiveness was due to the acquisition of two professional writers and a motion picture consultant who was employed on a temporary basis, and the development of another writer from clerical ranks.

There is no reliable means of determining how many men and women in the United States received information concerning vocational rehabilitation as a result of the output of public information, but clippings from hundreds of daily newspapers throughout the country, which carried stories on varied aspects of the Federal-State programs, indicate that the reading audience numbered well into the tens of millions. In addition to the printed word, the story of vocational rehabilitation was also furthered by the production of 6 transcribed radio programs (of which 325 copies were distributed to the States after the close of the fiscal year) and 11 radio scripts for live broadcast.

One of the major informational undertakings was the production of a three-reel motion picture, in color and sound, for the purpose of demonstrating that rehabilitated and properly placed workers with physical or mental disabilities are as efficient and as desirable employees as unimpaired persons.

This motion picture was produced at low cost to the Government through the provision of footage shot in accordance with our script needs by Ford Motor Company, Western Electric Company, Caterpillar Tractor Company, and Bulova Watch Company. While the production was not completed during the fiscal year, it progressed to the point where success was assured and subsequent progress has corroborated that conclusion.

The picture was enhanced in value, and the cost was further reduced, by the free performances of talent from the ranks of the handicapped, including Jane Froman, the singer; Al Capp, creator of Li'l Abner

and other cartoon characters; Bill Stern, the radio announcer, and Tami Mauriello, the pugilist.

During the fiscal year 1946, 20 articles for professional journals; 20 press releases for national or local publications, which gave greater newspaper coverage and greater response than ever before experienced; 5 draft press releases which were used effectively by the States after adaptation (through insertion of local names and figures); several articles for encyclopedias and other reference works; and 22 speeches were produced.

In addition, there was stimulation of beneficial articles in such publications as *Look* and the *New York Times Sunday Magazine* and the distribution of reprints of the latter to State and local offices. This has proved effective.

The office also stimulated, and assisted in the preparation of an Associated Press feature story which ran in 150 of the largest Sunday newspapers in the country.

One pamphlet—*Why Be Handicapped?* (150,000 copies) was produced in the fiscal year 1946 and another—*A Public Service* (150,000 copies) was revised and reprinted.

The following additional pamphlets were planned, designed, written, and illustrated in 1946 and will be completed and distributed during the fiscal year 1947:

- (a) *Vocational Rehabilitation for Civilians*—new (250,000 copies) a basic publication for general distribution.
- (b) *Opportunities for the Deaf and the Hard of Hearing*—new (50,000 copies) for distribution to the deaf and the hard of hearing and their organizations.
- (c) *Efficiency of the Impaired Worker*—new (50,000 copies) for employers.
- (d) *The Doctor and Vocational Rehabilitation*—new (200,000 copies) for the medical profession and suppliers of medical services.

During the fiscal year, the Office of Vocational Rehabilitation advised and assisted many State agencies individually, and all of them together, in discharging their responsibility of informing the handicapped, employers, labor, the medical profession, and the general public of the vocational rehabilitation services available, their purpose, their effectiveness, and their economic and social value.

This advice and assistance was given orally in meetings with some 50 State Directors; in direct letters in response to specific requests; through regional representatives; through the preparation of draft materials (press and radio); through circular memoranda in which suggestions on effective use of draft and other informational materials

were transmitted; through the establishment and maintenance of a State Informational Exchange Service; through provision of pattern publications and posters, of which plates or stencils were made available, together with technical advice on their effective use; through development of an adaptable planned program of information activity for all States; through development of a pattern public information plan (with sample materials) for special use in opening a new office or extending additional services; and in other ways.

This service is being continued and strengthened during the current fiscal year through provision of field visits to State agencies for sufficient periods to give practical assistance in the development of informational skills, in the establishment of informational programs, and in the actual execution of informational plans.

Special Projects and/or Studies

In addition to special projects enumerated elsewhere, the following special projects and studies were either completed or some work done on them as indicated:

1. A study of the "Physical Restoration in Georgia" was completed and sent to print as was a compilation of data regarding efficiency of the impaired worker.
2. All of the forms on the study of the self-employed rehabilitated in 1942 were returned during the year. The code of the study was set up.
3. A study on amputees rehabilitated during the fiscal year 1945 was prepared for printing.
4. A study on poliomyelitis rehabilitants during the fiscal year ended June 30, 1945, was prepared.
5. Statistics for studies on persons rehabilitated during the fiscal year 1945 who were disabled from tuberculosis, visual defects, hearing defects, hernia, epilepsy, cerebral palsy, and mental disorders were prepared.
6. Conclusions of a study on placement activities of industrial specialists for the blind were prepared for use of regional representatives.
7. An article, "Vocational Rehabilitation of the Cerebral Palsied," was written and published.

SERVICES PROVIDED BY THE STATES¹

Number of Persons Served

The 51 State rehabilitation agencies and 30 commissions for the blind (3 commissions for the blind were not in operation long enough to submit reports) reported 267,048 disabled persons on their registers during the fiscal year ended June 30, 1946, a decrease of 2.9 percent from the 275,093 on the registers of the 51 State rehabilitation agencies and the 23 commissions for the blind during the 1945 fiscal year. On the other hand, of the disabled persons on the registers, 169,794 received rehabilitation services during the 1946 fiscal year as compared with 161,050 provided such services during the 1945 fiscal year—an increase of 5.4 percent.

An analysis of the 169,794 persons who were furnished services indicates that a total of 43,242 disabled persons were placed in employment during the fiscal year 1946. Of this number, there were 36,106 cases closed as rehabilitated into employment, and the remaining 7,136 were either persons in temporary employment at the end of the year or persons in "rehabilitation employment" who were being followed up at the close of the year in order to determine whether their placements were satisfactory. The cases of 3,118 disabled persons were closed after they had received some rehabilitation services in addition to interviewing, counseling, and guidance but were not placed in employment for such reasons as personal factors, aggravated disability or death. The services of interviewing, counseling, and guidance were found sufficient to assist another 27,276 disabled persons in making a vocational adjustment, and their cases were closed without further rehabilitation services. There were 1,844 disabled persons whose cases were transferred to other rehabilitation agencies, both within the State and outside the State and to the Veterans Administration.

There were 101,450 disabled persons who had received some rehabilitation service during the current fiscal year and who, at the close of the fiscal year, were still on the rolls in various stages of the process of rehabilitation. Included in this group are the 7,136 persons mentioned above as being either in temporary employment or in "rehabilitation employment" but not yet closed as rehabilitated into

¹ Data for fiscal year ended June 30, 1946, are as of Oct. 1, 1946, and are preliminary.

employment, as well as 4,012 persons who had completed their rehabilitation process except for being placed in employment. There were 28,621 persons in the group who were being prepared for employment; 4,858 for whom preparations for employment had been started but which had been interrupted temporarily; and 56,823 persons who were undergoing diagnosis, whose cases were being evaluated, or for whom a "rehabilitation plan" was being completed before beginning the process of preparation for employment.

During the fiscal year, the cases of 40,998 persons who had been reported to the State agencies and were on their registers, were closed after investigation without receiving rehabilitation services. The major reasons for the closure of these cases are as follows: Services declined, services not needed, individual not eligible, individual not sufficiently cooperative to make rehabilitation possible, individual needed services other than vocational rehabilitation, referred to other agencies, and migratory shifting by individual.

At the close of the fiscal year, there were 56,256 persons on the registers of the State agencies who were in reported status and were awaiting investigation before being accepted for rehabilitation services.

Sources of Referral of the Disabled

In order that disabled individuals who are in need of rehabilitation services and the State rehabilitation agencies and the commissions for the blind which provide such services may be brought together, the State agencies and the Office of Vocational Rehabilitation cooperate with a number of public and private agencies with related programs. These cooperative arrangements also serve to make the best use of existing facilities for the disabled and to avoid wasteful duplication of services. In addition to cases referred by these cooperating groups, cases also are referred by other interested groups and individuals such as social agencies, hospitals, churches, city and county officials, doctors, and employers. (Table 3 lists sources of new cases referred to the State agencies.)

During the 1946 fiscal year, the public welfare agencies accounted for a larger percentage (10.8 percent) of the total number of cases referred than did any other type of agency. This source was followed closely by the public schools (9.9 percent), the United States Employment Service (9.7 percent), and the State workmen's compensation agencies (8.8 percent). The number of cases that were self-referred accounted for 9.6 percent of the total, and 8.2 percent of the referrals came from individuals other than physicians, public officials, and employers. Health agencies as a group referred 19.1 percent, and educational sources referred 12.4 percent of the new cases.

Services Purchased for the Disabled

The State rehabilitation agencies and the commissions for the blind provide a large number of specialized rehabilitation services to the disabled, in addition to the regular general rehabilitation services of interviewing, counseling, guidance, and placement. Some of these specialized services are obtained without cost to the agencies and others are purchased.

During the fiscal year, diagnostic examinations were purchased for 56,671 disabled persons, a 38.9 percent increase over the 40,786 for whom such examinations were purchased in the preceding fiscal period. Diagnostic services consisted of medical examinations for 53,512, a 37.6 percent increase over the 38,896 in 1945; psychiatric examinations for 1,050, a 39.1 percent increase over the 755 for the corresponding period of a year ago; and psychological examinations for 2,109, an 85.8 percent increase over the 1,135 in the 1945 fiscal year.

Medical, psychiatric, surgical, dental, and other treatments were purchased for 7,217 disabled persons, a 92.3 percent increase over the 3,753 treatments purchased in the 1945 fiscal year.

Prosthetic appliances were purchased for 8,287 disabled persons, a 1.9 percent increase over 8,135 in the preceding period.

A marked increase in the number of clients hospitalized was also evident. A total of 5,570 persons received hospital care purchased by the State agencies. This represents an increase of 104.6 percent over 1945, when 2,723 patients were hospitalized. Convalescent home care was furnished for 107 persons, a 98.1 percent increase over the 54 cases in the 1945 fiscal year. Physical and occupational therapy were provided for 364 persons, an 89.6 percent increase over the total of 192 in the corresponding period a year back. Eighteen persons received nursing care in the fiscal year just ended, compared to 13 in the 1945 fiscal year, an increase of 38.5 percent.

Training is one of the basic services provided for disabled persons by State agencies as a means of preparing them for employment. During the recent war years, the large variety of war production training activities that were available, without cost, provided unlimited opportunities for training. The conclusion of these war training activities, and the termination of hostilities had a marked effect upon the type of training provided for vocationally handicapped persons by the States. Instead of the short intensive training for jobs in war industries, disabled persons now need and are provided more comprehensive and thorough training for employment in peacetime pursuits. Data are not available for those disabled persons who were provided training without cost to the State agencies; data are available, however, concerning the number for whom training was purchased.

In the 12-month period ended June 30, 1946, training was purchased for 33,547 disabled persons—an increase of 25.9 percent over 26,642 in the preceding fiscal period. Of the 1946 group, 25,028 persons received training in educational institutions such as colleges, universities, business schools, and the like, compared to 19,965 who received the same kind of training in the 1945 fiscal year—an increase of 25.4 percent; 4,311 received training on the job in the period just ended, a 24.7 percent increase over 3,457 last year; 1,707 received correspondence training for a 24.2 percent increase over 1,374 last year; 2,501 received tutorial instruction, a 35.5 percent increase over 1,846 in the preceding fiscal period.

In order to provide training, it was necessary to provide transportation for 4,243 persons, a decrease of 8.9 percent in the 4,655 of the preceding year, and maintenance for 15,366 persons during the training period, an increase of 39.9 percent over 10,984 in 1945. Also, training supplies and equipment were purchased for 16,218 disabled persons, an increase of 16.7 percent over the total of 13,898 the preceding year.

In connection with the placement of disabled persons in employment, the purchase of placement equipment increased 120 percent in 1946 over 1945—1,208 disabled persons receiving this type of assistance compared to 549. Occupational licenses were provided for 234 persons, compared to 172 in the preceding fiscal year, an increase of 36 percent.

Characteristics of and Services to Persons Rehabilitated in the Fiscal Year 1946¹

An indication of the contribution which the vocational rehabilitation program makes to society through the rehabilitation of disabled persons, can be obtained from a study of the characteristics of and the services to disabled persons rehabilitated into employment.

During the fiscal year ended June 30, 1946, there were 36,106 disabled persons rehabilitated into employment, of whom 27,066, or 75 percent, were males. Approximately 87 percent of the rehabilitants were white, and about 12 percent were Negro.

At the time these persons were surveyed by the State agencies for consideration of their acceptability for rehabilitation services, over half (53.2 percent) were between 15 and 30 years of age. Approximately 75 percent of the group were unemployed at the time of survey, and 16 percent of the group had never worked. Although about 39 percent of the group were supporting themselves at the time they were surveyed, either through independent income or wage earnings,

¹ Data presented in this section are estimates obtained by adjusting data from preliminary tabulations of 16,926 rehabilitated persons to the total of 36,106 rehabilitated persons.

about 40 percent were dependent upon their families, about 6 percent were receiving either public or private relief, and about 5 percent were receiving either unemployment or workmen's compensation. Approximately 43 percent of this group of disabled persons who were rehabilitated had one or more dependents.

Disabilities of Rehabilitated Persons

An analysis of the disabilities of this group of rehabilitated persons indicates that about 31 percent of the persons had disabilities that originated in employment or other accidents, about 48 percent originated in disease, 16 percent were congenital, while about 5 percent resulted from either military or civilian war service. Approximately 41 percent of these rehabilitants were under the age of 15 at the time of disablement, and about 34 percent were between the ages of 15 and 30. This makes a total of 75 percent of the group having disabilities that originated before they were 30 years of age, and who, after having received rehabilitation services, would have many years in which those services would contribute advantageously both to the individual and to society.

As in former years, disabled persons with various types of orthopedic involvements, amputations, and congenital absence of members constitute approximately half of the disabled persons rehabilitated into employment during the current fiscal year. Disabled persons with orthopedic impairments resulting from other than poliomyelitis and cerebral palsy totaled 9,881; resulting from poliomyelitis, 2,320; and resulting from cerebral palsy, 516. Disabled persons with amputations or congenital absence of members totaled 5,169. There were 3,948 persons who were blind or visually defective, 2,795 deaf or with hearing defects, and 305 with speech defects.

Mental illness was the disability of 1,961 of the disabled persons, while 3,022 had pulmonary tuberculosis, 1,372 had hernias, 1,115 had cardiac diseases (except those resulting from rheumatic fever), 387 had asthma, 302 had a cardiac disease resulting from rheumatic fever, and 2,891 had diseases other than those specifically mentioned here. The disabilities of 122 disabled persons were not reported.

Training Provided and Placements Made

These disabled persons were provided counseling and guidance, and, where needed, physical restoration and/or training, according to definite plans for preparing them for employment consistent with their mental and physical capacities. Some type of training was provided for 39 percent of the group. Of those trained, 23 percent were trained in business establishments, 21 percent in colleges or universities, 19 percent in business colleges, 13 percent in private trade schools, 9 percent in public vocational schools, 2 percent in defense training classes,

and the remaining 13 percent were provided tutorial, correspondence school, and other such types of training.

Proper placement of disabled persons, after counseling, guidance, and adequate preparation for employment through physical restoration and training, makes possible job adjustments of considerable variation. Approximately 20 percent of the disabled persons rehabilitated during the current fiscal year were placed as mechanics of various kinds, watchmakers, jewelers, and in other skilled occupations. About 17 percent were placed as clerks, general office workers, stenographers, bookkeepers, and in other clerical and kindred occupations. Approximately 15 percent were placed in semiskilled occupations and 14 percent in service occupations, while 9 percent were placed in unskilled jobs. About 9 percent were placed in positions as teachers, accountants, draftsmen, and in other professional and semiprofessional positions. The remaining 16 percent were placed in managerial, sales, and related positions, or became farmers, farm laborers or unpaid family workers.

Earnings Increased After Rehabilitation

As was pointed out earlier in this section, at the time of application for rehabilitation services, only 39 percent of this group of 36,106 rehabilitated persons were supporting themselves, and only 25 percent of the total group were employed. In order to be eligible for services, these persons must have been in danger of losing their jobs or in employment that was substantially below their highest capabilities. On the basis of the status at the time of application for rehabilitation services, without the advantages that result from these services, the total of annual earnings of the group was estimated at about \$11,600,000. After rehabilitation, the rate of annual earnings of these disabled persons, not including family workers, farmers and others whose earnings were difficult to estimate, was an estimated \$56,300,000—an increase of almost 400 percent over the estimated total annual earnings of the group before rehabilitation.

Some form of support must be provided for every permanently disabled person, which often has meant public or private assistance at an average yearly cost per case of \$300 to \$600; such assistance, however, is only a temporary palliative. Vocational rehabilitation services are provided at an average cost of \$300 per rehabilitated case, which is a nonrecurring expenditure. The results of this investment, from a statistical standpoint, have been pointed out in the above paragraphs. There are no financial yardsticks to measure the differences between a self-reliant citizen carrying his own responsibilities and making a contribution to the society of which he is a part, and a depressed citizen dependent upon charity. Those differences, how-

ever, mean more than dollars and cents in terms of happiness, good citizenship, and social usefulness.

District of Columbia Rehabilitation Service

The case load of the District of Columbia Rehabilitation Service reached an all-time high of 4,106 disabled individuals in the fiscal year.

Cases remaining on the roll on July 1, 1946, totaled 2,716 as compared with 1,187 on July 1, 1945. During the fiscal year 1946, 342 disabled clients completed their rehabilitation.

The various services rendered during the fiscal year consisted of counsel and guidance, including psychological, occupational and manual dexterity tests. Physical restoration services included 984 physical and psychiatric examinations, medical treatments for 42 persons, of whom 17 were hospitalized with a total of 422 days of hospitalization. Artificial appliances were purchased for 96 clients, and training was provided to 139 persons.

Medical officers of the Office of Vocational Rehabilitation provided consultative services in an effort to strengthen relationships between the District of Columbia Rehabilitation Service and the physicians of Washington and thereby develop resources for medical examination. This need became increasingly apparent when the United States Public Health Service dispensary was forced to curtail the amount of diagnostic service formerly rendered to clients of the District of Columbia Rehabilitation Service.

During the fiscal year, a new program of case finding was initiated. This Service made a complete survey of the case load of the Public Assistance Division, Board of Public Welfare. This survey involved a study of approximately 4,000 cases, which resulted in the referral of about 250 cases receiving public assistance. A study of records of traffic accidents was also made to determine the number of persons who are currently becoming disabled as a result of accidents and who need rehabilitation services. Referral of almost 1,000 individuals resulted. Plans for case finding surveys were made with other private and public agencies.

A Rehabilitation Advisory Council was established to provide guidance to this Service with respect to development of standards for the program and its interpretation to the community. The Council is composed of four committees: Medical Advisory Committee, Committee on Services for the Visually Handicapped, Labor Management Committee, and Committee on Council Membership. Typical of the work of these committees is that of the Labor-Management Committee, which developed plans for interpreting to employer and employee groups the services which are available to eligible disabled persons.

APPENDIX

TABLE 1.—Summary of case load during fiscal year ended June 30, 1946

[Corrected to Oct. 1, 1946]

United States total of cases registered.....	267, 048
1. Cases receiving services.....	169, 794
<i>a.</i> Closed—rehabilitated—placement in employment fol- lowing services.....	36, 106
<i>b.</i> Closed—rehabilitation services—interview, counsel- ing, guidance.....	27, 276
<i>c.</i> Closed—served—not employed ¹	3, 118
<i>d.</i> Closed—transferred to other agency.....	1, 844
<i>e.</i> Live-case roll ²	101, 450
2. Cases reported and closed after investigation ³	40, 998
3. Cases reported ⁴	56, 256

¹ Served, not employed because of personal factors, illness, aggravated disability, death.

² In process of rehabilitation on June 30, 1946.

³ Services declined; services not needed; individual not eligible; individual not sufficiently cooperative to make rehabilitation possible; individual needing services other than vocational rehabilitation, referred to other agencies; migratory shifting by individual.

⁴ Reported—status not determined.

Source: Forms RA100A, Consolidated Case Load Flow Sheets.

TABLE 2.—Total case load, by region and State, during fiscal year ended June 30, 1946

[Corrected to Oct. 1, 1946]

Region and State	Total	Number closed as—					Number on rolls	
		Rehabil- itated into employ- ment	Inter- viewed and coun- seled	Served not em- ployed ¹	Report- ed and investi- gated ²	Trans- ferred to other Agency	Live- case roll ³	Report- ed ⁴
United States total.....	267, 048	36, 106	27, 276	3, 118	40, 998	1, 844	101, 450	56, 256
Region I total.....	26, 549	3, 780	3, 092	331	5, 501	228	10, 087	3, 530
Connecticut.....	4, 392	721	256	38	185	20	2, 449	723
Connecticut (blind).....	56	14	5	3	0	2	32	0
Maine.....	1, 716	203	119	32	601	2	504	255
Maine (blind).....	66	9	8	11	6	0	23	9
Massachusetts.....	3, 403	405	436	59	743	12	1, 103	645
New Hampshire.....	785	72	132	5	244	6	326	0
New Hampshire (blind).....	41	2	9	0	2	0	24	4
New York.....	13, 467	2, 115	1, 939	137	2, 693	176	4, 791	1, 616
New York (blind).....	6	0	0	0	0	0	6	0
Rhode Island.....	782	129	147	19	8	4	473	2
Rhode Island (blind).....	92	23	7	5	4	2	41	10
Vermont.....	1, 634	80	30	19	1, 011	3	252	239
Vermont (blind).....	109	7	4	3	4	1	63	27
Region II total.....	41, 044	3, 966	4, 946	447	7, 716	179	14, 706	9, 084
Delaware.....	1, 978	268	75	71	832	23	529	180
Delaware (blind).....	54	17	1	7	3	0	23	3
District of Columbia.....	4, 106	342	385	39	609	15	1, 227	1, 489
Maryland.....	3, 199	389	175	40	351	84	1, 348	812
New Jersey.....	3, 800	569	792	132	146	19	1, 967	175
New Jersey (blind).....	332	47	40	11	0	14	211	9
Pennsylvania.....	13, 728	736	1, 996	76	3, 718	3	3, 776	3, 423
Virginia.....	6, 248	825	646	27	598	18	2, 893	1, 241
West Virginia.....	7, 599	773	836	44	1, 459	3	2, 732	1, 752
Region III total.....	70, 436	10, 175	6, 240	708	5, 686	602	28, 653	18, 372
Alabama.....	8, 715	1, 450	517	117	613	54	4, 384	1, 580
Florida.....	3, 790	600	926	108	291	64	1, 689	112
Florida (blind).....	649	15	44	24	4	5	479	78
Georgia.....	26, 960	2, 400	1, 221	120	2, 270	154	7, 931	12, 855
Mississippi.....	3, 967	670	706	6	255	16	1, 994	260
Mississippi (blind).....	421	21	67	0	28	0	274	31

See footnotes at end of table.

TABLE 2.—Total case load, by region and State, during fiscal year ended June 30, 1946—Continued

Region and State	Total	Number closed as—					Number on rolls	
		Rehabilitated into employment	Interviewed and counseled	Serviced not employed ¹	Reported and investigated ²	Transferred to other States	Live-case roll ³	Reported ⁴
Region III—Continued								
North Carolina	6,852	2,031	380	29	98	3	4,044	287
North Carolina (blind)	1,324	60	13	19	54	4	750	424
Puerto Rico	3,425	340	287	8	446	2	1,223	1,119
South Carolina	5,670	1,463	860	91	360	212	2,283	401
South Carolina (blind)	503	52	50	11	21	4	353	12
Tennessee	7,677	1,044	1,143	103	1,225	73	2,880	1,209
Tennessee (blind)	483	29	26	12	12	11	369	24
Region IV total	46,049	8,074	4,739	646	5,110	399	19,879	7,202
Illinois	7,827	1,278	1,559	75	767	166	3,462	520
Indiana	4,922	736	760	31	267	48	2,865	215
Indiana (blind)	194	0	11	0	7	0	175	1
Kentucky	6,703	1,511	393	59	902	16	1,967	1,855
Michigan	11,849	2,203	498	161	1,578	61	4,496	2,852
Michigan (blind)	982	93	121	35	67	13	582	71
Ohio	5,304	1,025	778	81	263	43	2,781	333
Ohio (blind)	864	87	113	15	65	25	495	64
Wisconsin	7,275	1,104	496	175	1,189	25	3,004	1,282
Wisconsin (blind)	129	37	10	14	5	2	52	9
Region V total	11,698	1,281	781	90	1,945	78	4,881	2,642
Iowa	2,786	349	311	17	836	0	1,034	239
Iowa (blind)	40	5	3	0	1	0	12	19
Minnesota	5,542	536	254	26	805	25	2,495	1,401
Minnesota (blind)	745	99	50	14	71	1	298	212
Nebraska	1,054	74	54	6	165	2	274	479
Nebraska (blind)	51	6	2	0	0	9	29	5
North Dakota	1,173	153	89	18	62	19	549	283
South Dakota	272	50	18	9	5	22	165	3
South Dakota (blind)	35	9	0	0	0	0	25	1
Region VI total	29,505	5,139	3,939	276	2,696	179	12,234	5,042
Arkansas	4,567	541	637	14	784	17	1,771	803
Kansas	1,919	179	253	38	157	33	879	380
Kansas (blind)	257	37	57	23	8	1	118	13
Louisiana	3,885	676	1,148	46	328	4	1,107	576
Louisiana (blind)	301	38	58	9	23	6	141	26
Missouri	3,189	765	754	22	214	13	1,212	209
Missouri (blind)	585	85	113	25	37	4	285	36
New Mexico	788	71	86	23	95	36	330	147
New Mexico (blind)	73	4	0	0	1	3	51	14
Oklahoma	3,920	898	292	40	245	17	2,074	354
Texas	8,218	1,723	437	22	606	45	3,787	1,598
Texas (blind)	1,803	122	104	14	198	0	479	886
Region VII total	5,767	567	653	35	570	57	2,413	1,472
Colorado	961	57	214	8	10	24	485	163
Idaho	980	96	122	10	198	0	163	391
Idaho (blind)	32	0	0	1	1	0	15	15
Montana	1,240	201	82	3	227	3	427	297
Montana (blind)	85	5	6	2	1	1	42	28
Utah	1,929	155	188	10	107	9	1,039	421
Wyoming	540	53	41	1	26	20	242	157
Region VIII total	36,000	3,124	2,886	585	11,774	122	8,597	8,912
Arizona	1,184	94	203	25	240	3	382	237
California	22,467	2,292	1,611	480	6,337	99	5,826	5,822
Hawaii	5,935	123	166	10	3,669	3	388	1,576
Nevada	182	17	38	0	19	1	99	8
Oregon	3,650	310	748	11	1,170	3	789	619
Oregon (blind)	450	27	47	2	146	4	87	137
Washington	1,922	229	72	31	190	9	898	493
Washington (blind)	210	32	1	26	3	0	128	20

¹ Serviced, not employed because of personal factors, illness, aggravated disability, death.² Services declined; services not needed; individual not eligible; individual not sufficiently cooperative to make rehabilitation possible; individual needing service other than vocational rehabilitation, referred to other agencies; migratory shifting by individual.³ In process of rehabilitation on June 30, 1946.⁴ Reported—status not determined.

Source: Forms RA 100A, Consolidated Case Load Flow Sheets.

TABLE 3.—Number of new cases received, by source of referral, during fiscal year ended June 30, 1946

[Corrected to Oct. 1, 1946]

	Total		State rehabilitation agencies		Commissions for the blind	
	Number	Percent	Number	Percent	Number	Percent
Total.....	114,520	100.0	1109,703	100.0	14,817	100.0
Educational, total.....	14,240	12.4	13,994	12.8	246	5.1
Business college.....	1,006	.9	1,004	.9	2	(2)
Private school.....	1,178	1.0	1,171	1.1	7	.1
Public school.....	11,347	9.9	11,229	10.3	118	2.4
State school for handicapped.....	709	.6	590	.5	119	2.6
Health, total.....	21,904	19.1	21,668	19.8	236	4.9
Crippled children's agency.....	6,000	5.2	5,998	5.6	2	(2)
State mental hospital.....	232	.2	229	.2	3	.1
Tuberculosis sanatorium.....	3,993	3.5	3,992	3.6	1	(2)
Marine hospital or relief station.....	1,154	1.0	1,151	1.0	3	.1
Other hospital or clinic.....	3,335	2.9	3,242	3.0	93	1.9
Other health agency.....	3,741	3.3	3,715	3.4	26	.5
Physician.....	3,449	3.0	3,341	3.0	108	2.3
Insurance, total.....	12,828	11.2	12,812	11.7	16	.3
Insurance company.....	178	.2	178	.2	0	-----
Bureau of Old Age and Survivors Insurance.....	50	(2)	49	(2)	1	(2)
State workmen's compensation agency.....	10,126	8.8	10,119	9.3	7	.1
U. S. Employees Compensation Commission.....	2,474	2.2	2,466	2.2	8	.2
Welfare, total.....	14,798	12.9	12,539	11.4	2,259	46.9
American Red Cross.....	1,018	.9	1,005	.9	13	.3
Public welfare agency.....	12,403	10.8	10,301	9.4	2,102	43.6
Private welfare agency.....	1,377	1.2	1,233	1.1	144	3.0
Other Government agencies, total.....	24,993	21.8	24,282	22.1	711	14.8
Selective Service System.....	4,840	4.2	4,831	4.4	9	.2
State rehabilitation agency.....	3,188	2.8	2,759	2.5	429	8.9
U. S. Employment Service.....	11,101	9.7	10,919	10.0	182	3.8
Veterans Administration.....	2,166	1.9	2,108	1.9	58	1.2
War Shipping Administration.....	467	.4	466	.4	1	(2)
Public official.....	3,231	2.8	3,199	2.9	32	.7
Miscellaneous, total.....	25,757	22.6	24,408	22.2	1,349	28.0
Artificial limb company.....	1,158	1.0	1,157	1.1	1	(2)
Employer.....	793	.7	770	.7	23	.5
Labor union.....	107	.1	106	.1	1	(2)
News items, publicity, etc.....	1,576	1.4	1,556	1.4	20	.4
Other individual.....	9,402	8.2	9,088	8.3	314	6.5
Self-referred.....	10,898	9.6	9,990	9.0	908	18.9
Other.....	1,823	1.6	1,741	1.6	82	1.7

¹ Differs from total of new cases reported on Consolidated Case Load Flow Sheets Forms RA00A.² Less than 0.05 percent.

Source: Forms VR:RS7, Sources of New Cases.

TABLE 4.—*Number of individuals for whom services were purchased, by type of such services, during fiscal year ended June 30, 1946*

[Corrected to Oct. 1, 1946]

Type of service	Total	State reha- bilitation agencies	Commis- sions for the blind
Examinations, total.....	56,671	53,513	3,158
Medical.....	53,512	50,474	3,038
Psychiatric.....	1,050	1,036	14
Psychological.....	2,109	2,003	106
Treatment, total.....	7,217	6,789	428
Medical.....	1,834	1,704	130
Psychiatric.....	268	264	4
Surgical.....	4,331	4,095	236
Dental.....	558	509	49
Other.....	226	217	9
Prosthetic appliances, total.....	8,287	8,007	280
Artificial limb(s).....	3,473	3,462	11
Braces.....	1,002	1,001	1
Hearing aids.....	1,081	1,060	21
Glasses.....	1,692	1,380	212
Surgical.....	776	749	27
Repair of appliance(s).....	337	329	8
Other.....	26	26	0
Training, total.....	33,547	32,104	1,443
Educational institution.....	25,028	24,434	594
Employment.....	4,311	3,984	327
Correspondence.....	1,707	1,702	5
Tutorial.....	2,501	1,984	517
Maintenance, total.....	16,052	15,116	936
Medical.....	686	652	34
Training.....	15,366	14,464	902
Transportation, total.....	7,898	7,227	671
Examinations.....	1,865	1,784	81
Medical.....	1,790	1,579	211
Training.....	4,243	3,864	379
Auxiliary services, total.....	17,713	17,050	663
Training supplies and equipment.....	16,218	15,790	428
Placement equipment.....	1,208	988	220
Occupational licenses.....	234	228	6
Other.....	53	44	9
Hospitalization, total.....	5,570	5,248	322
Convalescent home, total.....	107	105	2
Physical and occupational therapy, total.....	364	363	1
Nursing care, total.....	18	14	4

Source: Forms VR-RS6, Number of individuals—Services purchased.

TABLE 5.—*Number of persons rehabilitated into employment, by type of job in which they were placed, fiscal year ended June 30, 1946¹*

[Corrected to Oct. 1, 1946]

Type of job or occupation	Number	Percent of total
Total.....	36,106	100.0
Professional, total.....	2,080	5.8
Accountants and auditors.....	235	.7
Teachers, primary.....	295	.8
Teachers, secondary.....	347	1.0
Other.....	1,203	3.3
Semiprofessional, total.....	1,233	3.4
Draftsmen.....	254	.7
Laboratory technicians.....	405	1.1
Other.....	574	1.6
Managerial and official, total.....	661	1.8
Retail managers.....	231	.6
Other.....	430	1.2
Clerical and kindred, total.....	6,237	17.3
Bookkeepers.....	1,011	2.8
Clerks, general office, etc.....	2,022	5.6
Office machine operators.....	220	.6
Pay roll clerks.....	165	.5
Secretaries.....	420	1.2
Shipping and receiving clerks.....	233	.6
Stenographers and typists.....	1,028	2.9
Stock clerks.....	443	1.2
Other.....	695	1.9
Sales and kindred occupations, total.....	1,666	4.6
Sales clerks.....	475	1.3
Sales persons.....	334	.9
Other.....	857	2.4
Service occupations, total.....	4,989	13.8
Housekeepers, domestic.....	371	1.0
Personal.....	1,194	3.3
Waiters and waitresses.....	288	.8
Kitchen workers.....	310	.9
Barbers and beauticians.....	438	1.2
Attendants, hospital.....	158	.4
Protective.....	790	2.2
Guards and watchmen.....	436	1.2
Soldiers, sailors, and marines.....	354	1.0
Building service.....	1,135	3.1
Janitors.....	503	1.4
Porters.....	403	1.1
Elevator operators.....	229	.6
Other.....	1,499	4.2
Agriculture, fishing, etc., total.....	2,385	6.6
Farmers.....	1,229	3.4
Farm hands.....	757	2.1
Other.....	399	1.1
Skilled, total.....	7,052	19.7
Shoemakers.....	397	1.1
Watchmakers, jewelers.....	715	2.0
Machinists.....	271	.8
Welders.....	160	.4
Carpenters.....	299	.8
Mechanics, airplane.....	90	.2
Mechanics, auto.....	550	1.5
Mechanics (other), and repairmen.....	911	2.5
Other.....	3,659	10.4

See footnotes at end of table.

TABLE 5.—Number of persons rehabilitated into employment, by type of job in which they were placed, fiscal year ended June 30, 1946¹—Continued

Type of job or occupation	Number	Percent of total
Semiskilled, total.....	5,291	14.7
Textile workers.....	537	1.5
Machine shop.....	199	.6
Drivers, truck, bus, etc.....	953	2.6
Attendants, filling station, etc.....	299	.8
Airplane mechanic helpers.....	24	.1
Aircraft assembler.....	28	.1
Laundry worker.....	220	.6
Repairman.....	162	.4
Other.....	2,869	8.0
Unskilled, total.....	3,343	9.3
Laborers:		
Construction.....	263	.7
Transportation (except railroad).....	122	.3
Process, textiles.....	173	.5
Other.....	2,785	7.8
Unpaid family worker.....	1,086	3.0
Not reported.....	83	(2)

¹ Estimates based on preliminary tabulations of 16,926 individuals.² Excluded from distribution.

Source: Forms VR:RS9, Closed Case Reports.

TABLE 6.—Total expenditures from Federal and State funds for vocational rehabilitation by State boards of vocational education during the fiscal year ended June 30, 1946

State or Territory	Federal and State funds			Classification of expenditures		
	Total	Federal	State	Admin- stration	Vocational guidance and place- ment	Purchased services
United States total.....	\$12,662,244.24	\$9,081,959.69	\$3,580,284.55	\$923,301.99	\$4,540,996.31	\$7,192,945.94
Region I total.....	1,639,723.99	1,185,802.29	453,921.70	125,093.31	597,856.77	916,773.91
Connecticut.....	326,031.55	230,082.84	95,948.71	28,036.73	106,097.40	191,897.42
Maine.....	108,327.03	73,330.39	34,996.64	6,159.37	32,174.39	69,993.27
Massachusetts.....	204,591.32	155,584.34	49,006.98	20,352.69	87,658.15	96,880.48
New Hampshire.....	35,912.96	25,056.27	10,856.69	1,559.23	12,640.35	21,713.38
New York.....	823,909.50	604,832.49	219,077.01	57,788.20	317,825.78	448,295.52
Rhode Island.....	63,832.48	42,895.34	20,937.14	4,401.49	17,334.21	42,096.78
Vermont.....	77,119.15	54,020.62	23,098.53	6,795.60	24,126.49	46,197.06
Region II total.....	1,900,212.30	1,396,030.95	504,181.35	136,490.86	746,584.15	1,017,137.29
Delaware.....	100,696.64	73,926.63	26,770.01	5,766.04	41,390.58	53,540.02
District of Colum- bia.....	135,895.13	110,895.13	25,000.00	9,270.03	69,747.37	56,877.73
Maryland.....	151,629.01	117,909.63	33,719.38	11,252.98	72,937.28	67,438.75
New Jersey.....	310,888.59	232,606.53	78,282.06	22,826.75	130,740.31	157,321.53
Pennsylvania.....	661,392.09	473,687.90	187,704.19	15,530.95	229,313.28	376,547.86
Virginia.....	224,152.53	161,829.02	62,323.51	2,733.99	86,771.53	124,647.01
West Virginia.....	315,558.31	225,176.11	90,382.20	19,110.12	115,683.80	180,764.39
Region III total.....	3,083,356.60	2,151,236.55	932,120.05	192,573.53	1,023,052.98	1,867,730.09
Alabama.....	311,243.44	205,362.53	105,880.91	20,831.90	78,649.72	211,761.82
Florida.....	320,958.63	239,198.65	81,759.98	23,401.70	133,319.86	164,237.07
Georgia.....	860,095.95	617,529.02	242,566.93	54,684.72	319,776.45	485,634.78
Mississippi.....	287,475.88	191,939.59	75,536.29	18,665.00	97,643.87	151,167.01
North Carolina.....	461,087.48	296,763.34	164,324.14	23,823.21	107,679.86	329,584.41
Puerto Rico.....	166,572.80	110,971.77	55,601.03	14,066.99	40,676.76	111,829.05
South Carolina.....	321,285.36	222,394.97	98,890.39	17,433.44	105,456.72	198,395.20
Tennessee.....	374,637.06	267,076.68	107,560.38	19,666.57	139,849.74	215,120.75

¹ Based on reports from States, subject to audit.

TABLE 6.—*Total expenditures from Federal and State funds for vocational rehabilitation by State boards of vocational education during the fiscal year ended June 30, 1946—Continued*

State or Territory	Federal and State funds			Classification of expenditures		
	Total	Federal	State	Adminis- tration	Vocational guidance and place- ment	Purchased services
Region IV total.....	\$2,622,189.82	\$1,828,662.05	\$793,527.77	\$211,208.08	\$820,350.12	\$1,590,131.62
Illinois.....	578,189.26	436,429.77	141,759.49	49,601.60	243,092.49	285,495.17
Indiana.....	394,660.08	245,304.88	149,355.20	31,754.28	64,077.41	298,828.39
Kentucky.....	223,095.95	164,554.17	58,541.78	13,936.31	92,031.54	117,128.10
Michigan.....	612,024.86	417,419.90	194,604.96	56,374.43	166,391.01	389,259.42
Ohio.....	309,588.27	216,215.58	93,372.69	24,402.40	98,440.49	186,745.38
Wisconsin.....	504,631.40	348,737.75	155,893.65	35,139.06	156,817.18	312,675.16
Region V total.....	477,735.93	351,010.86	126,725.07	39,091.73	185,144.09	253,500.11
Iowa.....	129,918.41	101,583.58	28,334.83	7,924.33	65,324.43	56,669.65
Minnesota.....	148,526.83	108,485.86	40,040.97	13,574.67	54,850.22	80,101.94
Nebraska.....	85,721.74	68,037.76	17,683.98	7,694.81	42,658.98	35,367.95
North Dakota.....	76,903.66	49,551.39	27,352.27	6,578.03	15,621.09	54,704.54
South Dakota.....	36,665.29	23,352.27	13,313.02	3,319.89	6,689.37	26,656.03
Region VI total.....	1,535,251.32	1,127,988.01	407,263.31	107,707.93	612,908.30	814,635.09
Arkansas.....	171,603.18	133,425.63	38,177.55	12,381.21	82,866.87	76,355.10
Kansas.....	118,908.59	89,253.06	29,655.53	9,241.51	50,356.02	59,311.06
Louisiana.....	223,035.37	162,132.23	60,903.14	15,495.72	85,733.38	121,806.27
Missouri.....	201,161.87	145,251.71	55,910.16	11,976.67	77,364.88	111,820.32
New Mexico.....	39,601.73	30,133.68	9,468.05	4,023.50	16,633.64	18,944.59
Oklahoma.....	256,682.42	188,251.73	68,430.69	18,706.95	101,114.09	136,861.38
Texas.....	524,258.16	379,539.97	144,718.19	35,882.37	198,839.42	289,536.37
Region VII total.....	257,766.80	190,126.91	67,639.89	19,234.80	103,106.80	135,425.20
Colorado.....	39,909.38	30,944.83	8,964.55	4,558.15	17,276.69	18,074.54
Idaho.....	32,021.66	23,539.61	8,482.05	2,480.48	12,577.08	16,964.10
Montana.....	84,724.03	61,058.38	23,665.65	7,002.18	30,390.55	47,331.30
Utah.....	75,296.34	54,690.11	20,606.23	3,540.70	30,543.19	41,212.45
Wyoming.....	25,815.39	19,893.98	5,921.41	1,653.29	12,319.29	11,842.81
Region VIII total.....	1,146,007.48	851,102.07	294,905.41	96,901.75	451,493.10	597,612.63
Arizona.....	43,849.87	32,502.01	11,347.86	2,825.04	18,307.87	22,716.96
California.....	810,355.43	604,456.55	205,898.88	69,496.94	321,610.57	419,247.92
Hawaii.....	48,645.98	39,284.56	9,361.42	6,101.89	23,821.26	18,722.83
Nevada.....	10,255.15	7,523.66	2,731.49	691.39	4,100.79	5,462.97
Oregon.....	107,766.19	75,007.26	32,758.93	7,887.14	34,030.76	65,848.29
Washington.....	125,134.86	92,328.03	32,806.83	9,899.35	49,621.85	65,613.66

TABLE 7.—Total expenditures from Federal and State funds for vocational rehabilitation of the blind by State commissions or agencies for the blind during the fiscal year ended June 30, 1946

State or Territory	Federal and State funds			Classification of expenditures		
	Total	Federal	State	Adminis- tration	Vocational guidance and placement	Purchased services
United States total.....	\$1,087,244.21	\$920,279.25	\$166,964.96	\$112,809.01	\$640,505.45	\$333,929.75
Region I total.....	59,452.56	52,216.05	7,236.51	8,932.27	36,047.30	14,472.99
Connecticut.....	2,519.25	2,227.00	292.25	514.22	1,420.83	584.50
Maine.....	8,680.10	6,878.51	1,781.59	763.98	4,332.94	3,583.18
New Hampshire.....	4,924.31	4,845.55	78.76	794.09	3,972.71	157.51
New York.....	16,710.57	15,891.26	819.31	4,193.51	10,878.65	1,638.61
Rhode Island.....	16,306.52	14,043.66	2,262.86	1,890.65	9,890.16	4,525.71
Vermont.....	10,331.81	8,330.07	2,001.74	776.02	5,552.31	4,003.48
Region II total.....	75,848.88	67,248.11	8,600.77	12,424.12	46,223.24	17,201.52
Delaware.....	15,172.82	12,374.50	2,798.32	1,855.58	7,720.61	5,596.63
New Jersey.....	49,434.88	43,632.43	5,802.45	5,101.52	32,728.47	11,604.89
Pennsylvania.....	11,241.18	11,241.18		5,467.02	5,774.16	
Region III total.....	358,103.44	285,437.00	72,666.44	28,559.39	184,211.19	145,332.86
Florida.....	66,362.94	57,268.18	9,094.76	6,367.77	41,805.66	18,189.51
Mississippi.....	40,212.32	32,488.31	7,724.01	2,333.37	22,430.93	15,448.02
North Carolina.....	186,259.36	139,294.96	46,964.40	13,559.83	78,770.73	93,928.80
South Carolina.....	27,870.54	24,330.85	3,539.69	2,133.61	18,657.56	7,079.37
Tennessee.....	37,398.28	32,054.70	5,343.58	4,164.81	22,546.31	10,687.16
Region IV total.....	289,020.28	251,426.02	37,594.26	30,367.63	183,464.16	75,188.49
Indiana.....	10,883.58	9,278.70	1,604.88	1,940.77	5,733.06	3,209.75
Michigan.....	126,211.83	105,723.08	20,488.75	12,335.55	72,898.79	40,977.49
Ohio.....	121,280.14	108,503.41	12,776.73	12,398.80	83,327.89	25,553.45
Wisconsin.....	30,644.73	27,920.83	2,723.90	3,692.51	21,504.42	5,447.80
Region V total.....	58,380.38	50,338.88	8,041.50	5,099.17	37,198.23	16,082.98
Iowa.....	3,986.10	3,682.27	303.83	347.95	3,030.49	607.66
Minnesota.....	29,120.33	24,538.84	4,581.49	1,631.02	18,326.34	9,162.97
Nebraska.....	15,300.52	14,161.14	1,139.38	2,029.10	10,992.67	2,278.75
South Dakota.....	9,973.43	7,956.63	2,016.80	1,091.10	4,848.73	4,033.60
Region VI total.....	201,121.86	174,307.38	26,814.48	23,015.05	124,477.89	53,628.92
Kansas.....	14,239.86	12,593.55	1,646.31	1,444.02	9,503.23	3,292.61
Louisiana.....	25,962.73	23,259.33	2,703.40	3,032.06	17,523.88	5,406.79
Missouri.....	49,480.25	43,943.14	5,537.11	4,487.23	33,918.80	11,074.22
New Mexico.....	3,644.41	2,763.53	880.88	549.55	1,333.11	1,761.75
Texas.....	107,794.61	91,747.83	16,046.78	13,502.19	62,198.87	32,093.55
Region VII total.....	13,653.10	11,295.32	2,357.78	1,408.38	7,529.16	4,715.56
Idaho.....	4,080.51	3,887.97	192.54	665.66	3,029.77	385.08
Montana.....	9,572.59	7,407.35	2,165.24	742.72	4,499.39	4,330.48
Region VIII total.....	31,663.71	28,010.49	3,653.22	3,003.00	21,354.28	7,306.43
Oregon.....	13,820.82	11,859.77	1,961.05	1,770.81	8,127.92	3,922.09
Washington.....	17,842.89	16,150.72	1,692.17	1,232.19	13,226.36	3,384.34

¹ Based on reports from States, subject to audit.

